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JUL 21 2009

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68851 7590 07/15/2009

KNOBBE, MARTENS, OLSEN & BEAR, LLP
2040 MAIN STREET
FOURTEENTH FLOOR
IRVINE, CA 92614

07/22/2009 SSANDAR1 00000001 10789359

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(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/789,359	02/26/2004	James H. Brauker	DEXCOM.037A	5145
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TITLE OF INVENTION: INTEGRATED DELIVERY DEVICE FOR CONTINUOUS GLUCOSE SENSOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional	NO	\$1510	\$0	\$1510	\$1510	10/15/2009
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EXAMINER	ART UNIT	CLASS-SUBCLASS
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BOUCHELLE, LAURA A	3763	604-161000
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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	<input type="checkbox"/> 3 _____

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Dexcom, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

San Diego, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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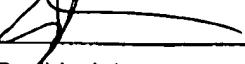
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Authorized Signature 

Date 07.21.2009

Typed or printed name Cynthia Arko

Registration No. 61,420

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Adjustment date 04/01/2009 INTFSW 00001022 10789359
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01 FC:1501

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

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